

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Zank et al.
Title: FOOD SERVER FLUID LEVEL
CONTROL
Appl. No.:
Filing Date: Herewith
Examiner:
Art Unit:

CERTIFICATE OF EXPRESS MAILING
I hereby certify that this correspondence is being deposited with the United States Postal Service's "Express Mail Post Office To Addressee" service under 37 C.F.R. § 1.10 on the date indicated below and is addressed to: Commissioner for Patents, PO Box 1450, Alexandria, Virginia 22313-1450.

EV 431597451 US 3/15/04
(Express Mail Label Number) (Date of Deposit)

Carolyn Simpson

(Printed Name)

Carolyn Simpson
(Signature)

UTILITY PATENT APPLICATION
TRANSMITTAL

Mail Stop PATENT APPLICATION
Commissioner for Patents
PO Box 1450
Alexandria, Virginia 22313-1450

Sir:

Transmitted herewith for filing under 37 C.F.R. § 1.53(b) is the nonprovisional utility patent application of:

Jeffrey T. Zank
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Enclosed are:

- [X] Specification, Claim(s), and Abstract (28 pages).
- [X] Formal drawings (4 sheets, Figures 1, 2, 3, 4).
- [X] Application Data Sheet (37 CFR 1.76).

The filing fee is calculated below:

	Claims as Filed		Included in Basic Fee		Extra Claims		Rate		Fee Totals
Basic Fee							\$770.00	=	\$770.00
Total	61	-	20	=	41	x	\$18.00	=	\$738.00
Claims:									
Independents	7	-	3	=	4	x	\$86.00	=	\$344.00
:									
If any Multiple Dependent Claim(s) present:						+	\$290.00	=	\$0.00
Surcharge under 37 CFR 1.16(e) for late filing of Executed Declaration and late payment of filing fee						+	\$130.00	=	\$130.00
							SUBTOTAL:	=	\$1982.00
[]							Small Entity Fees Apply (subtract ½ of above):	=	\$0.00
							TOTAL FILING FEE:	=	\$1,982.00

☒ The required filing fees are not enclosed but will be submitted in response to the Notice to File Missing Parts of Application.

☐ The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 06-1447. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 06-1447.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date March 15, 2004

By Todd A. Rathe

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